

AMENDED IN SENATE JUNE 23, 2004

AMENDED IN ASSEMBLY APRIL 26, 2004

CALIFORNIA LEGISLATURE—2003–04 REGULAR SESSION

ASSEMBLY BILL

No. 2821

Introduced by Assembly Member Daucher

February 20, 2004

An act to add Section 14019.7 to the Welfare and Institutions Code, relating to health care services.

LEGISLATIVE COUNSEL'S DIGEST

AB 2821, as amended, Daucher. Medi-Cal: skilled nursing facilities: payment for noncovered services.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Services, pursuant to which medical benefits are provided to public assistance recipients and certain other low-income persons. Existing law prohibits a provider of health services from seeking reimbursement or payment from a Medi-Cal beneficiary for covered services.

This bill would provide that, if permitted by federal law, a relative of a skilled nursing facility resident who is a Medi-Cal beneficiary may pay an additional amount to the facility to enable the resident to obtain *requested* noncovered services, as described in the bill. The bill would prohibit the charge for these services from exceeding the charges to private pay residents for the same services.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Section 14019.7 is added to the Welfare and Institutions Code, to read:

14019.7. (a) Notwithstanding Section 14019.4 and if permitted by federal law, a relative of a skilled nursing facility resident who is a beneficiary under this chapter may pay an additional amount to the facility to enable the resident to obtain *requested* noncovered services, such as a private room, telephone, or television, or for bed hold days *that exceed a period paid for under the state plan*.

(b) The additional charge for *requested* noncovered services shall not exceed the amount charged to private pay residents. *The additional charge for bed hold days shall not exceed the rate paid for by the Medi-Cal program for a covered bed hold day.* The additional charge for a private room shall not exceed the difference between the private pay rate for a semiprivate room and a private room.

(c) *Prior to accepting supplemental payment for holding a bed for a resident in a facility, a facility shall disclose to the relative the resident's right under federal law to be readmitted without charge upon the first availability of a bed in a semiprivate room in that facility, other state and federal laws regarding bed hold rights, the average number of bed vacancies at that facility for the past month, and the current number of bed vacancies. Written information regarding bed vacancies shall be provided to the relative at the first available opportunity.*

(d) *The ability of a resident's relative to pay an additional amount for noncovered services shall not be a condition of admission.*